

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE			
						APPLICANT(S)				
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51	/		
2		/					52			
3							53			
4							54			
5							55			
6							56			
7							57			
8							58			
9							59			
10		/					60	/		
11		/					61			
12							62			
13							63			
14							64			
15							65			
16							66			
17							67			
18							68			
19							69			
20		/					70	/		
21							71	/		
22							72	/		
23							73	/		
24							74			
25							75			
26							76			
27							77			
28							78			
29							79			
30		/					80	/		
31							81			
32							82			
33							83			
34							84			
35							85			
36							86			
37							87			
38							88			
39							89			
40							90	/		
41		/					91	/		
42	/						92	/		
43	/						93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	2						TOTAL IND.	2		
TOTAL DEP.	48	↔	↔	↔			TOTAL DEP.	48	↔	↔
TOTAL CLAIMS	50						TOTAL CLAIMS	50		

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CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
101		/					/ 51	2		
2		/					52	2		
3		/					53	2		
4							54	1		
5							55	1		
6							56	1		
7		/					57	1		
8							58			
9							59			
10							60			
11							61			
12							62			
13							63			
14							64			
15							65			
16							66			
17							67			
18							68			
19							69			
20		/					70			
21		/					71			
22							72			
23							73			
24							74			
25							75			
26							76			
27		/					77			
28		/					78			
29		2					79			
30		2					80			
31		2					81			
32		2					82			
33		2					83			
34		2					84			
35		2					85			
36		2					86			
37		2					87			
38		2					88			
39		2					89			
40		2					90			
41		2					91			
42		2					92			
43		2					93			
44		2					94			
45		2					95			
46		2					96			
47		2					97			
48		2					98			
49		2					99			
50		2					100			
TOTAL IND.	0						TOTAL IND.	21		
TOTAL DEP.	72						TOTAL DEP.	8		
TOTAL CLAIMS	72						TOTAL CLAIMS	10		